



SAN DIEGO REGIONAL HAZARDOUS MATERIALS QUESTIONNAIRE

OFFICE USE ONLY

UPFP# _____

HV# _____

BP DATE ____ / ____ / ____

Business Name	Business Contact	Telephone # ()	
Project Address	City	State	Zip Code
Mailing Address	City	State	Zip Code
Project Contact	Telephone # ()		

The following questions represent the facility's activities, NOT the specific project description.

PART I: FIRE DEPARTMENT – HAZARDOUS MATERIALS DIVISION: OCCUPANCY CLASSIFICATION: Indicate by circling the item, whether your business will use, process, or store any of the following hazardous materials. If any of the items are circled, applicant must contact the Fire Protection Agency with jurisdiction prior to plan submittal.

- | | | | |
|----------------------------------|-----------------------|-------------------------------------|--------------------------|
| 1. Explosive or Blasting Agents | 5. Organic Peroxides | 9. Water Reactives | 13. Corrosives |
| 2. Compressed Gases | 6. Oxidizers | 10. Cryogenics | 14. Other Health Hazards |
| 3. Flammable/Combustible Liquids | 7. Pyrophorics | 11. Highly Toxic or Toxic Materials | 15. None of These. |
| 4. Flammable Solids | 8. Unstable Reactives | 12. Radioactives | |

PART II: SAN DIEGO COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH – HAZARDOUS MATERIALS DIVISIONS (HMD): If the answer to any of the questions is yes, applicant must contact the County of San Diego Hazardous Materials Division, 1255 Imperial Avenue, 3rd floor, San Diego, CA 92101. Call (619) 338-2222 prior to the issuance of a building permit.

FEES ARE REQUIRED.

Expected Date of Occupancy: ____ / ____ / ____

- | | | |
|-----------------------------|--------------------------|--|
| YES | NO | |
| 1. <input type="checkbox"/> | <input type="checkbox"/> | Is your business listed on the reverse side of this form? (check all that apply). |
| 2. <input type="checkbox"/> | <input type="checkbox"/> | Will your business dispose of Hazardous Substances or Medical Waste in any amount? |
| 3. <input type="checkbox"/> | <input type="checkbox"/> | Will your business store or handle Hazardous Substances in quantities equal to or greater than 55 gallons, 500 pounds, 200 cubic feet, or carcinogens/reproductive toxins in any quantity? |
| 4. <input type="checkbox"/> | <input type="checkbox"/> | Will your business use an existing or install an underground storage tank? |
| 5. <input type="checkbox"/> | <input type="checkbox"/> | Will your business store or handle Regulated Substances (CalARP)? |
| 6. <input type="checkbox"/> | <input type="checkbox"/> | Will your business use or install a Hazardous Waste Tank System (Title 22, Article 10)? |

☐ CalARP Exempt

Date ____ / ____ / ____
Initials ____

☐ CalARP Required

Date ____ / ____ / ____
Initials ____

☐ CalARP Complete

Date ____ / ____ / ____
Initials ____

PART III: SAN DIEGO COUNTY AIR POLLUTION CONTROL DISTRICT: If the answer to any of the questions below is yes, applicant must contact the Air Pollution Control District (APCD), 10124 Old Grove Road, San Diego, CA 92131-1649, telephone (858) 586-2600 prior to the issuance of a building or demolition permit. Note: if the answer to questions 3 or 4 is yes, applicant must also submit an asbestos notification form to the APCD at least 10 working days prior to commencing demolition or renovation, except demolition or renovation of residential structures of four units or less. Contact the APCD for more information.

- | | | |
|-----------------------------|--------------------------|--|
| YES | NO | |
| 1. <input type="checkbox"/> | <input type="checkbox"/> | Will the subject facility or construction activities include operations or equipment that emit or are capable of emitting an air contaminant? (See the APCD factsheet at http://www.sdapcd.org/info/facts/permits.pdf , and the list of typical equipment requiring an APCD permit on the reverse side of this form. Contact APCD if you have any questions). |
| 2. <input type="checkbox"/> | <input type="checkbox"/> | (ANSWER ONLY IF QUESTION 1 IS YES) Will the subject facility be located within 1,000 feet of the outer boundary of a school (K through 12)? (Public and private schools may be found after search of the California School Directory at http://www.cde.ca.gov/re/sd/ ; or contact the appropriate school district). |
| 3. <input type="checkbox"/> | <input type="checkbox"/> | Will there be renovation that involves handling of any friable asbestos materials, or disturbing any material that contains non-friable asbestos? |
| 4. <input type="checkbox"/> | <input type="checkbox"/> | Will there be demolition involving the removal of a load supporting structural member? |

Briefly describe business activities:

Briefly describe proposed project:

I declare under penalty of perjury that to the best of my knowledge and belief the responses made herein are true and correct.

Name of owner or Authorized Agent _____

Signature of Owner or Authorized Agent _____

Date ____ / ____ / ____

FOR OFFICIAL USE ONLY:
FIRE DEPARTMENT OCCUPANCY CLASSIFICATION: _____

BY: _____ DATE: ____ / ____ / ____

EXEMPT OR NO FURTHER INFORMATION REQUIRED		RELEASED FOR BUILDING PERMIT BUT NOT FOR OCCUPANCY		RELEASED FOR OCCUPANCY	
COUNTY-HMD	APCD	COUNTY-HMD	APCD	COUNTY-HMD	APCD